## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Davis, et al

Title:

**BASEPAN ASSEMBLY** 

Appl. No.:

Unknown

Filing Date:

11/12/03

Examiner:

Unknown

Art Unit:

Unknown

## CERTIFICATE OF EXPRESS MAILING I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to: Commissioner for Patents, PO Box 1450, Alexandria, Virginia 22313-1450. EL 979073275 US 11/12/03 (Express Mail Label Number) (Date of Deposit) Lori A. Wilson (Printed Name)

## UTILITY PATENT APPLICATION TRANSMITTAL

Mail Stop PATENT APPLICATION Commissioner for Patents PO Box 1450 Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

Reggie Davis 3987 Sauteed Trail Conley, GA 30288

Jeffrey K. Hudgins, Jr. 8440 Swiss Air Road Gainseville, GA 30506

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## Enclosed are:

- [X] Specification, Claim(s), and Abstract (11 pages).
- [X] Informal drawings (3 sheets, Figures 1, 2, 3, 4, 5, 6, 7).
- [X] Information Disclosure Statement.



- [X] Form PTO-1449 with copies of 13 listed reference(s).
- [X] Application Data Sheet (37 CFR 1.76).

The filing fee is calculated below:

	Claims as Filed		Included in Basic Fee		Extra Claims		Rate		Fee Totals
Basic Fee							\$770.00	=	\$770.00
Total Claims:	31	-	20	=	11	x	\$18.00	=	\$198.00
Independents:	3	-	3	=	0	X	\$86.00	=	\$0.00
If any Multiple Dependent Claim(s) present: + \$290.00							=	\$0.00	
						-	SUBTOTAL:	=	\$968.00
[]		S	mall Entity I	Tees	s Apply (	subtr	act ½ of above):	=	
					Τ	ΌΤΑ	L FILING FEE:	=	\$968.00

- [X] A check in the amount of \$968.00 to cover the filing fee is enclosed.
- [X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 06-1447. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1447.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date

11-12-03

ate \_\_\_\_\_\_

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